

5/4 PM

Dear Jack : I've just finished reading the mess and I like it very much. You have done a good job. Naturally there are some things which I believe could be reworded to advantage and I will make suggestions for your consideration. You can accept or reject as you think best.

There are one or two places which need some clarification I believe, at least I cannot follow your exact thought so I believe the average reader also would be confused. I'll indicate these and maybe you can spell them out in words if I syllable.

I'm always having trouble with your SW's so perhaps you missed this but I did not find the origin of your SW 959 (Span B ph 2?) Is this N97 ph 2. I'm sure I could find it in your correspondence but I haven't found it in the mess. If it really is missing shouldn't its source be given?

I'm really in a jam with this kick talk and I must finish it post haste. I hope you will forgive me for a delay in reviewing the present mess. I want to go over it carefully, of course. It will help a lot in the talk. I'll never again speak about things of which I know nothing.

I guess He had "intestinal flu" - that's a favorite diagnosis these days. Sorry, I only have a Gray Audiograph. Are records interchangeable? Best to you and Esther Blil

PS. There is one concept in the T₄ paper (24L) which is new to me, i.e. symbiotic or latent phage released by deleterious agents (low conc penicillin etc.). Phage^(FA) released from L42 is present in small amt. Grown back on L42 it (FA or phage) appears in large amt. Is this concept new? Is^{apparent} inability of released latent phage to grow on homolog. host simply due to lack of suitable indicator strains? Does transducing ability take the place of a suitable indicator strain, i.e. can the phage be measured by transducing ability when it cannot be measured by lysis? It seems to me that this fact is implied in your paper.

Please comment.

I found the reference to monophase → diphasic in the body of your MSS. Should any mention be made of it in ~~the discussion~~ discussion? I believe it does not fit your ideas of transduction. Think this over.

One thing we have omitted - l, or contact as phage 1 or phage 2 e.g. b-l, w and bw^{-1} , ii. Should the implications of this be looked into? I would gladly furnish absorbed l, w serum if you think this worthwhile.